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| <i>Index of Claims</i> *1055427 6* | Application/Control No. 10554276 | Applicant(s)/Patent Under Reexamination KIEMELE ET AL. |
| | Examiner Leslie J Evanisko | Art Unit 2854 |

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| ✓ | Rejected | - | Cancelled | N | Non-Elected | A | Appeal |
| = | Allowed | ÷ | Restricted | I | Interference | O | Objected |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant | | | | | | | | | | <input type="checkbox"/> CPA | | | | | | | | | | <input type="checkbox"/> T.D. | | | | | | | | | | <input type="checkbox"/> R.1.47 | | | | | | | | | |
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| CLAIM | | DATE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Final | Original | 06/21/2008 | 09/28/2008 | 04/22/2009 | 09/26/2009 | 03/27/2010 | 08/29/2010 | 12/15/2010 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | 6 | + | N | N | N | N | N | N | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 7 | + | N | N | N | N | N | N | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8 | + | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 9 | + | N | N | N | N | N | N | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 10 | + | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 11 | + | N | N | N | N | N | N | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 12 | + | N | N | N | N | N | N | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 13 | + | N | N | N | N | N | N | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 14 | + | N | N | N | N | N | N | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 15 | + | N | N | N | N | N | N | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 16 | | | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | 18 | | | | | ✓ | ✓ | - | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 19 | | | | | ✓ | ✓ | ✓ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 20 | | | | | ✓ | ✓ | - | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |